

# American Indian Health Commission for Washington State

# **Tribal Long Term Care**

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## **RECOMMENDATIONS:**

- Place the level of the 7.01 process back in ADSA
   Administration rather than solely with AAAs and HCS
   Regional Administrative Offices to respect the government-to-government process and assure consultation occurs at a level where decisions can be made, policy and procedures can be created and adequate resources can be provided to maintain and monitor the integrity of the process.
- Establish a workgroup to evaluate the relationships between Area Agencies on Aging, Aging and Disability Services Administration, and Tribal governments and develop better protocols for consultation and strategy development.
- Develop more culturally-appropriate community based services and/or develop methods for Tribes to independently provide both Medicaid and non-Medicaid services that have historically been provided by Area Agencies on Aging.
- Require AAA's to hire a "cultural" interpreter or liaison to provide outreach to Native Elders living in urban areas.
- Consult and coordinate with tribes on policy and budget for State implementation of the Older American Act .
- Develop Home & Community Based Services which specifically meet needs in Indian Country either through a geographically-based 1915(c) waiver or state support of Indian HCBS contracts for service under existing waivers which serve Indian people.